A RESOLUTION BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE

A RESOLUTION AUTHORIZING THE MAYOR, ON BEHALF OF THE DEPARTMENT OF FIRE AND RESCUE ("DEPARTMENT"), TO EXECUTE RENEWAL AGREEMENT NO. 1 FOR FC-6004007868, ATLANTA FIRE DEPARTMENT WELLNESS PROGRAM, WITH NORTH GREENVILLE FITNESS AND CARDIAC REHABILITATION CLINIC, INC., IN AN AMOUNT NOT TO EXCEED ONE HUNDRED FIFTY TWO THOUSAND DOLLARS (\$152,000.00), FOR THE PURPOSE OF MONITORING THE PHYSICAL CONDITION OF THE DEPARTMENT'S FIREFIGHTERS. ALL CONTRACTED WORK SHALL BE CHARGED TO AND PAID FROM FUND, ACCOUNT AND CENTER NUMBERS: 1A01 524001 W3302; 1B02 524001 W11T2201B6C0; 2H01 524001 W32001; AND FOR OTHER PURPOSES.

WHEREAS, on March 21, 2005 the City Council adopted Resolution 05-R-0467 and the Mayor approved the same on March 25, 2005, which authorized the Mayor to enter into an agreement with North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc. ("North Greenville") to establish a Wellness Program for the City of Atlanta's ("City") Department of Fire and Rescue ("Department"); and

WHEREAS, the City did advertise for FC-6004007868, on behalf of the Department, and North Greenville was awarded the contract; and

WHEREAS, on April 26, 2005, the City executed the agreement with North Greenville for FC-6004007868, Atlanta Fire Department Wellness Program (see attached as Exhibit "A"); and

WHEREAS, the terms of the aforesaid agreement was for a one (1) year term, with two (2) additional one (1) year renewal options at the City's sole discretion (see attached as Exhibit "A"); and

WHEREAS, the City has elected to exercise the first renewal option pursuant to the said agreement for an additional one year period; and

WHEREAS, the Chief of the Department of Fire and Rescue and the Chief Procurement Officer of the Department of Procurement have recommended that Renewal Agreement No. 1 be executed for a period of one (1) year.

THE COUNCIL OF THE CITY OF ATLANTA, GEORGIA HEREBY RESOLVES that the Mayor be and is hereby authorized to execute Renewal Agreement No. 1, on behalf of the Department of Fire and Rescue, with North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc., for FC-6004007868, Atlanta Fire Department Wellness Program, in an amount not to exceed one hundred fifty two thousand dollars (\$152,000.00), in order to implement a health and wellness program.

BE IT FURTHER RESOLVED, that the term of the agreement shall be for a one (1) year term, with one (1) one (1) year renewal option at the City's sole discretion.

BE IT FURTHER RESOLVED, that the City Attorney or her/his designee be and is hereby directed to prepare the contract for execution by the Mayor, and the contract shall be approved by the City Attorney or her/his designee as to form.

BE IT FURTHER RESOLVED that the contract shall not become binding upon the City and the City shall incur no obligation or liability hereunder until the same has been signed by the Mayor and attested to by the municipal clerk, and delivered to North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc.

BE IT FINALLY RESOLVED, that all contracted work shall be charged to and paid from Fund, Account, and Center Numbers: 1A01 524001 W3302; 1B02 524001 W11T2201B6C0; and 2H01 524001 W32001.

Department of Procurement Legislative Summary

To:

Public Safety and Administration Committee

Caption:

A RESOLUTION AUTHORIZING THE MAYOR OR DESIGNEE TO ENTER INTO A CONTRACTUAL AGREEMENT, ON BEHALF OF THE OFFICE OF THE MAYOR WITH NORTH GREENVILLE FITNESS AND CARDIAC REHABILITATION CLINIC, INC. FOR FC-6004007868, ATLANTA FIRE DEPARTMENT WELLNESS PROGRAM, IN AN AMOUNT NOT TO EXCEED ONE HUNDRED FIFTY-TWO THOUSAND DOLLARS (\$152,000.00). ALL FUNDS SHALL BE CHARGED TO AND PAID FROM FUND ACCOUNT AND CENTER NUMBERS: 1A01 524001 W3302, 1B02 524001 W11T2201B6C0, AND 2H01 524001 W32001.

Council Meeting Date:

February 5, 2007

Legislation Title:

Resolution authorizing the Mayor to execute Renewal No. One (1) with North Greenville Fitness and Cardiac

Rehabilitation Clinic, Inc.

Requesting Department:

Atlanta Fire-Rescue Department

Contract Type:

Professional Services

Source Selection:

Sealed Request for Proposals (RFP)

Advertisement:

Not Applicable

Bids/Proposals Due:

Not Applicable

Invitations Issued:

Not Applicable

Bids/Proposals Received:

Not Applicable

Proponents:

Not Applicable

Contractor:

North Greenville Fitness and Cardiac Rehabilitation Clinic,

Inc.

Estimated Value:

\$152,000.00

Scope Summary:

The Contractor will provide these functions, among others for the Atlanta Firefighters to ensure that their physical condition is monitored and it is safe for them to continue to

work:

Physician Consultation, Vision Screening, Audiometric Testing, Body Composition, Blood Draw, Pulmonary Function, Health Assessment Report, Department Summary Report, and Fitness Testing / Field Testing.

Background:

Renewal Agreement No. One (1) to be prepared and

executed.

Evaluation Team:

Not Applicable

Term of Contract:

One (1) Year

Fund Account Center:

1A01 524001 W3302;

1B02 524001 W11T2201B6C0; and

2H01 524001 W32001.

Method of Cost Recovery:

None

Prepared By:

Shannon L. Burton

Contact Number:

(404) 330-6988

FC-6004007868-04

PROJECT TITLE: AFD WELLNESS PROGRAM

DATE: January 12, 2004

TOTAL # OF PROPOSALS:

Page 1 of 1

							Darth Greenville	PROPONENT'S NAME	
		1	1	1	1				



CITY OF ATLANTA

SHIRLEY FRANKLIN

OFFICE OF CONTRACT COMPLIANCE 55 TRINITY AVENUE, S.W. SUITE 1700 ATLANTA, GEORGIA 30303 OFFICE (404) 330-6010 FAX (404) 658-7359

MEMORANDUM

TO:

Adam L. Smith, Chief Procurement Officer

Department of Procurement

FROM:

Hubert Owens, Acting Director,

Office of Contract Compliance

DATE:

March 3, 2005

RE:

Recommendation for FC 6004007868, Atlanta Fire Department Wellness

Program

The Office of Contract Compliance has reviewed the bid for minority and female business enterprise participation. North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc. is an eligible bidder under Section 2-1449(a)(2)(C) of the Equal Business Opportunity Code of Ordinances and has been deemed responsive by the Office of Contract Compliance. For your information, they have committed to utilizing AABEs, FBEs and NABEs as indicated below:

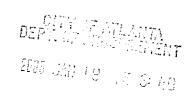
North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc.							
The Audiology Center	FBE	13%					
Craig Dates, MD	AABE	2%					
Walter Jackson, MD	AABE	2%					
Safdar Alam, MD	NABE	2%					
	NABE	2%					
Anish Sharma, MD		21%					
Participation Total		21,0					

If you have questions, please contact me at (404) 330-6010 or Bruce T. Bell at (404) 330-6009.

CC: File

Shannon Burton, DOP





CITY OF ATLANTA

FIRE - RESCUE DEPARTMENT

An Accredited Agency

City Hall East 675 Ponce de Leon Avenue, NE Suite 2001 Atlanta, GA 30308-1807 (404) 853-7000 * FAX (404) 853-7245/7092 ICHIEFS ID – ATLFDHQ DENNIS L. RUBIN FIRE CHIEF

MEMORANDUM

TO:

SHIRLEY FRANKLIN

MAYOR

Adam L. Smith

Chief Procurement Officer

FROM:

Dennis L. Rubin

Fire Chief Atlanta Fire and Rescue

DATE:

January 13, 2005

SUBJECT:

WELLNESS PROGRAM

After reviewing the Wellness Program bid proposal FC-6004007868, I find that the proposal by North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc. to be acceptable. The bid met the scope and intent of the program that we designed. There was only one company that responded; however, the cost of the program is also acceptable. I recommend that we award the contract to North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc. and expedite the contract as soon as possible.

If there are any questions, please call.

HDM/ssm



CITY OF ATLANTA

FIRE - RESCUE DEPARTMENT

An Accredited Agency

City Hall East 675 Ponce de Leon Avenue, NE Suite 2001 Atlanta, GA 30308-1807 (404) 853-7000 * FAX (404) 853-7245 ICHIEFS ID - ATLFD

DENNIS L. RUBIN FIRE CHIEF

MEMORANDUM

To:

SHIRLEY FRANKLIN

MAYOR

Adam L Smith,

Jennis J. Rubin Chief Procurement Officer

From:

Dennis L Rubin,

Chief Fire-Rescue

Date:

December 6, 2006

Subject:

WELLNESS PROGRAM

The Atlanta Fire-Rescue Department would like to extend our option to use North Greenville Fitness and Cardiac Rehabilitation clinic, under FC 6004007868. This program is essential to the wellness of our department and the ability to deliver needed services to the citizens of our city. North Greenville has agreed to extend last years cost of services as stated in previous issued purchase orders.

At this time we are requesting new purchase orders with appropriate cost centers. Attached are requisitions reflecting appropriate cost centers and accounts. If any further information is needed please contact Deputy Chief Harold Miller at 404-530-6639.

Cc: Nada Holloway Gayle Neal Shannon Burton

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N GKEFUATETE LYMERON

North Greenville Fitness and Cardiac Rehabilitation Clinic, Inc.

Director/Prosident: Charles F. Turner, R.N. Exec. Vice President: Chris R. Larsen

P.O. Box 606 Travelers Rest, South Carolina 29690

1-888-348-8911 fax (864) 834-7891

Date: December 6, 2006

To:

Dep. Chief Harold Miller Atlanta Fire Department

From: Chris Larsen, Exec. Vice President

North Greenville Fitness

Re:

Price Quote for 2007

The following price quote is based on the same services that were provided during the 2005 testing. Here is a price quote for our Health & Fitness Screening to the City of Atlanta Fire Departments: (prices valid through December 31, 2007)

Basic Health & Fitness Screening

(includes: Bloodwork, Pulmnonary Function, Body composition, 12 lead resting EKG, Sub-maximal stress test w/12-lead EKG, physician's review, individual and department reports)

\$ 195.00 per person

TOTAL PER PERSON =

\$ 195.00 per person

Optional services and pricing available

Only upon request:

Hepatitis B Antibody Screening

\$ 25.00 per person

Audiometric Testing with Hearing Booth

\$ 35,00 per person

Full Physician's Physical

\$ 50.00 per person

Chest X-Ray

\$ 100.00 per person

If you have any questions please give me a call. Thank you for your business!

Sincerely,

Exec. Vice President

WELLNESS PROGRAM (Outline)

DRAFT

Second Review 3-2-04

The Wellness program should meet the following Guidelines:

- N.F.P.A. 1582
- O.S.H.A. 1910.120
- O.S.H.A. 1910.134
- O.S.H.A. 1910.156

Program Overview

The Wellness Program should consist of the following:

- Complete Health History Questionnair designed for Firefighters
- Blood Work Evaluation
- Comprehensive medical exam
- Submaximal Stress test conducted with a 12-lead EKG and monitored by a Cardiologist
- Fitness Profile
- Consultation with a Physician
- Personal Exercise Prescription
- Assistance in Proper Exercise Techniques
- Assistance with Critical Cardiac Risk Factor Modification
- Fitness Progress Evaluations
- Yearend Evaluation
- Department Fitness/Health Summary

Blood Work Evaluation

Should meet SMAC-21 #048827

And should consist of the following:

Complete Blood Count (CBC) Platelets, CT

- White blood Count (WBC)
- Red Blood Count (RBC)
- Hemoglobin
- Hematocrit
- MCV (Mean Corpuscular Volume)
- MCH (Mean corpuscular Hemoglobin)
- MCHMC (Mean Corpuscular Hemoglobin Concentration)
- Platelets
- Polymorphonuclear Neutrophlis (Polys)
- Lymphs
- Monocytes
- Eos & Basos

Thyroid

- Thyroid-stimulating Hormone (TSH-high sensitivity)
- Thyroxine (T4)
- Triodothryonine-Thyroid Hormone Binding Ration (T3 Uptake)
- Free Thyroxine Index (FTI)

Lipids

- Cholesterol, Total
- Triglycerides
- High density lipoprotein cholesterol (HDL)
- Low density liporotein cholesterol (VLDL-calculated)
- Very low density lipoprptein cholesterol (VLDL-calculated)
- Total Cholesterol/HDL Ratio
- Estimated coronary Heart Disease Risk (calculated)

Chemistries

- Glucose
- Uric Acid
- Blood Urea Nitrogen (BUN)
- Creatinine
- BUN/Creatinine Ration
- Sodium, serum
- Potassium, Serum
- Calcium
- Phosphorus
- · Protein, Total
- Albumin, Serum
- Globulin, Total
- Albumin/Giobulin Ratio (A/G Ration)
- Bilirubin, Total liver function
- Alkaline Phosphatase liver function
- Lactic Acid Dehydrogenase (LDH heart enzyme)
- Serum Glutamic Oxidateve Transaminase (SGOT) liver function
- Serum Glutamic Pyruvic Transaminase (SGPT) liver function
- Gama Glutamic Transpeptidase (GGT) liver function
- Serum Cholinesterase
- Blood lead
- Urine heavy metals-Cadmium, arsenic, mercury
- Urinalysis
- Hemoccult test, hemoccult cards would be distributed in advance to be collected during the physical.
- P.S.A. for men over age35
- CA 125 levels drawn for all female

• Infectious Disease Screening to include Hepatitas A,B, and C.

Comprehensive Medical Exam:

The company which is awarded the contract to provide this program should conduct the Medical Exam and perform the Physical Fitness assessment at the work location so as not to disrupt the daily activity schedule of the company. The Medical Exam should be a hands on physical exam conducted by a Physician which should include.

- Body Composition evaluation, including height, weight and body fat estimation.
- Resting (12-lead EKG)
- Resting blood pressure
- Complete Pulmonary function assessment, to include spirometry and respirator clearance fit testing
- Hearing evaluation to include a complete audiometric testing
- Vision evaluation
- Head, eyes, ears, nose and throat
- Neck
- Cardiovascular
- Gastrointerintal
- Genitourinary
- Lymph Nodes
- Musculoskeletal
- Skin screening for cancers

Submaximal Stress Test

This test "Aerobic Capacity "should be conducted on exercise bicycle, treadmill or a step machine, using a 12 – lead EKG and monitored by a licensed physician. This Test should be conducted using an endpoint based on a predetermined HR, usually 85% of predicted maximal HR reserve (maximal HR – resting HR X 0.85 + resting HR). The Test should use the Bruce and Balke protocol or equivalent.

Fitness Profile

Fitness profile shall include the following: Aerobic Capacity Flexibility Muscular Strength Muscular Endurance

Consultation with a Physician

A consultation with a Physician shall include but not be limited to:

Evaluation of Medical Health
Evaluation of Aerobic Capacity
Evaluation of the Fitness Profile
Recommendations for improvement Medical Health, Aerobic Capacity, and Fitness level
Recommendations for preventative Critical Cardiac Risk Factors

Personal Exercise Prescription

The Personal Exercise Prescription should be based on the individuals needs and designed to meet those needs with the intent to improve the overall fitness level in accordance with the fitness needs of a professional Firefighter.

Assistance in Proper Exercise Techniques

The company receiving the contract should be provide individual assistance when needed in the proper exercise techniques.

Assistance with Critical Cardiac Risk Factor Modification

When an individual is identified with a critical Cardiac Risk Factor the company receiving the contract should provide assistance with risk factor modification.

Fitness Progress Evaluations

The company receiving the contract should provide a minimum of two progress reports to each employee throughout the year for the purpose of evaluating the employee exercise effectiveness.

Yearend Evaluation

The company receiving the contract should provide a report to each employee outlining their fitness levels at the end of the year. This report should outline the improvements or declines in fitness proficiencies during the preceding years efforts.

Department Fitness/Health Summary

The company receiving the contract should provide the department with a Department Health/Fitness Summary. This summary should indicate the number of personnel participating in the Health/Fitness program and should be a complete comprehensive statistical analysis of the Health/Fitness of the department.

Record Keeping

The company receiving the contract shall maintain the records for 30 years, copies are to be made available to the individual or his/her primary physician. In addition the company is to make available to any specialist who the individual request copies of the evaluations should specific problems occur. For example if an individual develops a lung problem over time, that individual should be able to request that the baseline pulmonary function studies done as part of this program be made available to the lung specialist who is treating the individual. The company receiving the contract shall provide a copy of the evaluation to the department to be reviewed only by qualified personnel should that individual need specific treatment.

Description of How the Program Should Work

The company that is awarded the contract to provide this program should conduct all aspects of the physical exam and assessment of the employee at the work location. Once all aspects of the health and fitness profile are complete the employee should meet with a Physician and be given an assessment of his/her health and fitness. The employee should be given an exercise prescription at that time. As well as other information concerning their health. If the employee is fit for duty the employee and the employer should be given a fitness for duty report.

If an employee is determined to have a condition that may affect their ability to perform their job as firefighters, may be a critical risk factor or if any serious conditions are detected during the screening the employee will be referred to their personal physician. The employee which receives such notice will be given a reasonable amount of time to report to their personal Physician and obtain a second opinion and if determined serious be placed in an appropriate treatment program. The attending Physician will provide a report to the program director indicating that the employee is being treated for the condition. If the condition is serious enough the employee will be placed off duty until cleared for duty by the physician. If the employee once receiving a medical reference form fails to report to their personnel physician in a reasonable amount of time the program director will notify the Fire Chief that the employee is off duty until such documentation is completed and forwarded to their office.

If the health condition is of a serious nature the employee may be placed off duty immediately and advised of the appropriate action.

Employees that are determined fit for duty will be returned to duty upon the completion of the assessment. Workout times will be determined by the daily activity schedule however each employee should be given at least one hour to be used for this purpose.

The company that receives the contract should provide supervision of workout activities upon request. On at least two occasions during the year at predetermined intervals the company should conduct two fitness progress evaluations "Fitness Profiles" for the purpose of tracking the employee's progress.

At the end of the year the company is to provide the Fire Department with a program summary report.

LARGE ATTACHMENT:

DOCUMENT(S),

MANUAL(S)

OR

MAP(S)

NOT COPIED,

PULL ORIGINAL FOR COPY OR TO VIEW

TRANSMITTAL FORM FOR LEGISLATION

TO: MAYOR'S OFFICE	ATTN: GREG PRIDGEON								
Legislative Counsel (Signature): Terry Grandison	Towny Dear								
Contact Number: <u>404-330-6946</u>									
Originating Department: Fire and Rescue									
Committee(s) of Purview: Public Safety and Legal A	Administration								
Council Deadline: February 12, 2007									
Anticipated Committee Meeting Date(s): February	27, 2007								
Anticipated Full Council Date: March 5, 2007									
Commissioner Signature Dennis J. Ku	lien 1								
Commissioner Signature Chief Procurement Officer Signature	N KMU / h								
CAPTION									
A RESOLUTION AUTHORIZING THE MAYOR, ON BEHALF OF THE DEPARTMENT OF FIRE AND RESCUE ("DEPARTMENT"), TO EXECUTE RENEWAL AGREEMENT NO. 1 FOR FC-6004007868, ATLANTA FIRE DEPARTMENT WELLNESS PROGRAM, WITH NORTH GREENVILLE FITNESS AND CARDIAC REHABILITATION CLINIC, INC., IN AN AMOUNT NOT TO EXCEED ONE HUNDRED FIFTY TWO THOUSAND DOLLARS (\$152,000.00), FOR THE PURPOSE OF MONITORING THE PHYSICAL CONDITION OF THE DEPARTMENT'S FIREFIGHTERS. ALL CONTRACTED WORK SHALL BE CHARGED TO AND PAID FROM FUND, ACCOUNT AND CENTER NUMBERS: 1A01 524001 W3302; 1B02 524001 W11T2201B6C0; 2H01 524001 W32001; AND FOR OTHER PURPOSES.									
FINANCIAL IMPACT (if any)									
Mayor's Staff Only									
(date)	y LC from CPO:(date)								
Submitted to Council: $\frac{2\sqrt{15/07}}{\text{(date)}}$									